

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006818

FILED
Apr 23, 2004
Secretary of State**Entity Name:** MUSICTHEATER SUPPORT FUND, INC.**Current Principal Place of Business:**400 E. COLONIAL DRIVE
SUITE 509
ORLANDO, FL 328034509**New Principal Place of Business:****Current Mailing Address:**400 E. COLONIAL DRIVE
SUITE 509
ORLANDO, FL 328034509**New Mailing Address:****FEI Number:** 59-3609648**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WOLPERT, PAIGE HAMMOND
315 E. ROBINSON ST.
SUITE 600
ORLANDO, FL 32801 US**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date**OFFICERS AND DIRECTORS:****Title:** D () Delete
Name: OWENS, ROLANN B
Address: 400 EAST COLONIAL DR. #509
City-St-Zip: ORLANDO, FL 32803**Title:** D () Delete
Name: OWENS, RICHARD R
Address: 400 EAST COLONIAL DR. #509
City-St-Zip: ORLANDO, FL 32803**Title:** D () Delete
Name: FILITOWSKI, CONRAD MRS
Address: 400 EAST COLONIAL DR #509
City-St-Zip: ORLANDO, FL 32803**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD R OWENS

MR.

04/23/2004

Electronic Signature of Signing Officer or Director_____
Date